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SUBJECT: SUSPECTED CHIKUNGUNYA INFECTION HAUNTS KERALA

REF: NEW DELHI 1098

¶1. (U) SUMMARY: The southern Indian state of Kerala has been gripped by an outbreak of suspected chikungunya infection - a debilitating but non-fatal mosquito-borne viral illness that is not transmitted from human-to-human. With media reports of thousands of people hospitalized in Kerala, nearby states have been gearing up to prevent the spread of the disease. But Kerala officials say that fears of chikungunya are overstated; according to them the vast majority of the hospitalizations are due to less worrisome viral fever, not chikungunya. END SUMMARY.

¶2. (SBU) Kerala is experiencing an outbreak of viral fever. Such an outbreak by itself is not a major concern, but this outbreak seems to involve the chikungunya infection as well as a few instances of dengue fever. The affected districts are Kottayam, Pathanamthitta, Idukki, Ernakulam, Kollam, and Thiruvananthapuram. Kerala's Chief Secretary Lizzie Jacob told post that 160,000 people have sought

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treatment for various forms of viral fever since June 1, 2007, out of which only 1,912 cases are suspected to be chikungunya infections. However, several media reports claim that nearly 7000 cases of suspected chikungunya fever have occurred in the state and at least 122 of these have been confirmed. The reports indicate that around 40 people have died owing to fever-related complications. Kerala Health Secretary Dr. Vishwas Mehta discounted media reports of deaths from chikungunya, saying that those deaths are obviously the result of other complications. He added that "a few cases of the more serious dengue" have also been confirmed in these districts, however. Four Indian army and navy medical teams are touring the districts, treating patients in medical camps and engaging in fogging operations to control the mosquito population.

¶3. (SBU) Post has been unable to confirm media reports that the virus has spread to the neighboring states of Tamil Nadu and Karnataka. But regardless, the neighboring states are concerned that the disease may spread. Tamil Nadu is maintaining a strict vigil and has begun fumigating vehicles crossing the border from Kerala and screening travelers at bus and train stations. The state government has directed local governments to engage workers in every village to destroy mosquitoes and larvae. It has also initiated a campaign appealing to citizens to clean up their surroundings and seek medical help if they develop fever. According to media reports, the government of Andhra Pradesh has asked hospitals to set up rapid response teams in case the disease spreads.

¶4. (SBU) There presently is poor transparency in reporting deaths during chikungunya outbreaks. Diagnosis is typically based on process of elimination, with misdiagnosis common (reftel). Mortality is not typically linked to chikungunya infection. The Director of the National Institute of Communicable Diseases (NICD)

told Embassy New Delhi that since the last outbreak India has heightened surveillance and increased from two to thirteen the number of labs in India capable of diagnosing the disease. He added that the Indian Council of Medical Research is looking at the strain variability aspects of the present outbreak.

15. (U) COMMENT: It appears that chikungunya is here to stay as an emerging public health threat that could affect cyclically many of India's crowded cities. Mission India will continue to monitor the disease and has adequately warned traveling American citizens of the health dangers involved with travel to India on the consular pages of Mission web sites, which includes a reference to sporadic outbreaks of chikungunya. END COMMENT.

16. (U) The message has been coordinated with Embassy New Delhi.

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